

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 3-15-2010

Address: On Tamarack road 100 yrd

Case #: 24-31298

south of intersection of

County: Marshall

Tamarack rd and CR 12

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☒ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☒ Open – No Structure
☒ Other: Culvert next to creek

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): _____
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: near creek
☐ Water Reactive Metal (Lithium): _____
☐ Anhydrous Ammonia: _____
☐ Hydrochloric Acid Gas Generator(s): _____
☒ Corrosive Acid: near creek
☒ Corrosive Base: near creek
☐ Other (item and location): _____

Child under age 18 discovered (check one)

- ☐ Yes _____ (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☐ Other: _____

This report is to be faxed to the following agencies that serve the location:

Fire Department: Plymouth

Fax: 574-936-5256

Health Department: Marshall

Fax: 574-936-9247

Child Protection Service: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: TRP Dan Tschida- ISP Phone 1-219-696-6242

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.